

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.
Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31.

Lobbyist's Registration Number

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

FOR OFFICE USE ONLY

Postmark Date: 12/12/97

PEG

114210
\$10.00
12/12/97
1980643

1. NAME DESSELLE VONNIE M. MI
Last First

2. BUSINESS PHONE (504) 295-1300
Area Code and Phone Number

3. BUSINESS ADDRESS 11918 BRICKSOME AVENUE BATON ROUGE, LA 70816
Street and No. City State Zip

4. EMPLOYER LOUISIANA FINANCE ASSOCIATION

5. EMPLOYER'S ADDRESS 11918 BRICKSOME AVENUE BATON ROUGE, LA 70816
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name LOUISIANA FINANCE ASSOCIATION

Address 11918 BRICKSOME AVENUE, BATON ROUGE, LA 70815

Business or purpose TRADE ASSOCIATION (FINANCE COMPANIES)

Does this person pay you? NO

If No, who pays you? IT'S PART OF MY JOB TO MONITOR BILLS THAT EFFECT OUR INDUSTRY AND REPORT TO OUR LOBBYIST AND LEGISLATIVE CHAIRMAN. I LOBBY ONLY LEGISLATORS THAT I KNOW PERSONALLY.

2. Name I KNOW PERSONALLY.

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

LOBBYING REGISTRATION FORM

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Lobbyist's Registration Number

3. Name _____
 Address _____
 Business or purpose _____
 Does this person pay you? _____
 If No, who pays you? _____
4. Name _____
 Address _____
 Business or purpose _____
 Does this person pay you? _____
 If No, who pays you? _____
5. Name _____
 Address _____
 Business or purpose _____
 Does this person pay you? _____
 If No, who pays you? _____

State of LOUISIANA

Parish of EAST BATON ROUGE

Before me, the undersigned authority, personally came and appeared VONNIE DESSELLE, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

Vonnie Deselle
 Signature of Lobbyist

Sworn to and subscribed before me on this 11th day of
DECEMBER, 19 97.

Claudia A. Duran
 Notary Public

Rev. 8/97

ATTACH
 2" x 2"
 PHOTOGRAPH
 HERE
 FOR
 INITIAL
 REGISTRATION
 ONLY

